

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66621	8/10
O.I.P.E. CLASSIFIER	MTW	50	16-00
FORMALITY REVIEW	HC	0573	01-28-00
RESPONSE FORMALITY REVIEW	lit	987	4-20-01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	5/27/03
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
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If more than 150 claims or 10 actions  
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